



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

RECEIVED
Missouri Breath Alcohol Program
By Carol Day at 8:35 am, Sep 11, 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

DATAMASTER SN 9700 38	DATE OF INSPECTION 9-4-09
LOCATION OF INSTRUMENT (STREET AND CITY) 800 University Dr Maryville	TIME OF INSPECTION 1727

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 48 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) 33.99	
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	

TEST 1 100	TEST 2 101	TEST 3 102
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<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED)											
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)											
REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

LOT # 09120		EXP 4-8-10	
Mong Gorn Labs		Percent 100	

INSPECTING OFFICER			
SIGNATURE 	PRINT NAME Charles Myrick		
TYPE II PERMIT NUMBER/EXPIRATION DATE 820297 10-15-10		TELEPHONE NUMBER (660) 562-1257	



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-684-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 09120 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1198 percent (w/vol) ethyl alcohol. The expiration date for this lot number is April 8, 2010 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
NIMSU CAMPUS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 970038
09/04/09

ARREST TIME: 16100
SUBJECT NAME:
MONTMARRI
DOB: 09/09/89 SEX: M
STATE/D.L.: MO/6678999
ARRESTING OFFICER:
MYRICKCHARLESH
OFFICER I.D.: 803
TESTING OFFICER:
MYRICKCHARLESH
OFFICER I.D.: 803
PERMIT NUMBER: 820297
EXPIRATION DATE: 10/15/10
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 17:33
INTERNAL STANDARD VERIFIED 17:34
RADIO INTERFERENCE

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
NIMSU CAMPUS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 970038
09/04/09

TESTING OFFICER:
MYRICKCHARLESH
OFFICER I.D.: 803
PERMIT NUMBER: 820297
EXPIRATION DATE: 10/15/10
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	17:42
INTERNAL STANDARD	VERIFIED	17:42
EXTERNAL STANDARD	.100	17:43
BLANK TEST	.000	17:44
EXTERNAL STANDARD	.101	17:45
BLANK TEST	.000	17:46
EXTERNAL STANDARD	.102	17:47
BLANK TEST	.000	17:47

N = 3
SIM. = .1
AVG. = .101

OPERATOR SIGNATURE

Card Stock No.
60021

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BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
NIMSU CAMPUS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 970038

09/04/09

17:27

DIAGNOSTIC CHECK

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS
SAMPLE CHAMBER: 48c

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHI
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnopqrstuvwxyz
~!@#\$%^&*()_+,-./0123456789:;<=>?@ABCDEFGHI

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.R.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



CHARLES MYRICK

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 10/15/08
Number **820297**
Expires 10/15/2010

MO 580-0771 (7-88)

John J. Mathewson

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)